



NOTICE OF INTENT TO VACATE/STORAGE REQUEST

Date of Notice: _____

Name of Resident: _____

Apartment: _____ Telephone: _____

I, the undersigned, hereby serve notice that I intend to vacate the above mentioned apartment on the _____ day of _____ 20_____

1. I am responsible for any and all costs incurred by any other party due to my failure to vacate the premises on or before the date indicated above, and any damage not identified prior to lease commencement.
2. I may not rescind this notice nor may I change the date of vacating except by written consent of HomePort Hampton Roads.
3. My failure to return the key issued for my apartment will result in a \$25 charge.
4. All trash, debris, and personal property must be removed from the premise prior to final inspection _____ (initials).
5. I understand submitting this notice does not relieve me of any liability I may have under my present Lease Agreement.

I intend to move to:

Command Address

State Zip Code

Work Phone #: _____ Cell Phone #: _____

Reason for vacating: _____

Resident's Signature _____ Date Vacating _____ 20_____

STORAGE

Request for storage: ___ Yes ___ No Anticipated date of return: _____

OFFICE USE ONLY

Notice Received by: _____ Date: _____

Final Inspection Date: _____ Time: _____